

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES

PCR Results Web Posting

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| Provider Organization | Innovative Life Solutions |
| Contact Person(s) | Suganthi Ramakrishnan, Compliance Manager |
| Phone Number | 703-967-3623 |
| Email Address(s) | SRamakrishnan@innovativelife.org |
| | |
| Provider Services Reviewed | Residential Habilitation, Supported Living, |
| | |
| | |
| # Individuals Reviewed by Service | Residential Habilitation - 2 Supported Living - 2 |
| | |
| Annual PCR dates | 12/09/2013 - 12/12/2013 |
| F/U Review Date(s) | 03/25/2014 |
| | |
| Annual Report Date | 12/30/2013 |
| F/U Report Date | 03/27/2014 |
| | |

The overall results on initial review were:

| Service | Person Centered Domains Score | % | Organization Score | % | Rating | Satisfaction Score | % |
|-----------------------------|--|----------|-------------------------------|----------|----------------------|-------------------------------|----------|
| | # Yes/Total | | # Yes/Total | | | # Yes/Total | |
| Residential Habilitation | 102/116 | 88% | 27/34 | 79% | Needs Improvement | 15/15 | 100% |
| All Mandatory Indicators | 17/21 | 81% | 10/13 | 77% | | | |
| Supported Living | 113/116 | 97% | 27/34 | 79% | Needs Improvement | 17/17 | 100% |
| All Mandatory Indicators | 23/24 | 96% | 10/13 | 77% | | | |

The overall results on follow up review were:

| Service | Person Centered Domains Score | % | Organization Score | % | Rating | Satisfaction Score | % |
|--------------------------------|--|----------|-------------------------------|----------|---------------|-------------------------------|----------|
| | # Yes/Total | | # Yes/Total | | | # Yes/Total | |
| Residential Habilitation | 113/116 | 97% | 34/34 | 100% | Satisfactory | 15/15 | 100% |
| All Mandatory Indicators | 20/21 | 95% | 13/13 | 100% | | | |
| Supported Living | 116/116 | 100% | 34/34 | 100% | Satisfactory | 17/17 | 100% |
| All Mandatory Indicators | 24/24 | 100% | 13/13 | 100% | | | |

Certification issued/dates/services

| Waiver Service | Certification Dates | Certification Type |
|--------------------------|----------------------------|---------------------------|
| Residential Habilitation | 12/09/2013 - 06/09/2014 | 6 Month |
| Supported Living | 12/09/2013 - 06/09/2014 | 6 Month |